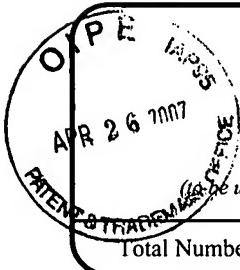


3728
JTW



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

16

| | |
|----------------------|-------------------|
| Application Number | 10/506,399 |
| Filing Date | September 1, 2004 |
| First Named Inventor | Ching Yi Chang |
| Art Unit | 3728 |
| Examiner Name | S. T. N. Luong |

Attorney Docket Number 20931YP

ENCLOSURES *(Check all that apply)*

Fee Transmittal Form

Fee Attached

Amendment/Reply

After Final

Affidavits/declaration(s)

Extension of Time Request

Express Abandonment Request

Information Disclosure Statement

Certified Copy of Priority Document(s)

Response to Missing Parts/
Incomplete Application

Response to Missing Parts
under 37 CFR 1.52 or 1.53

Drawing(s)

Licensing-related Papers

Petition

Petition to Convert to a Provisional Application

Power of Attorney, Revocation Change of Correspondence Address

Terminal Disclaimer

Request for Refund

CD, Number of CD(s) _____

After Allowance Communication to Technology Center (TC)

Appeal Communication to Board of Appeals and Interferences

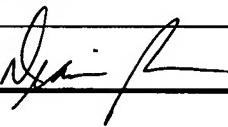
Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

Proprietary Information

Status Letter

Other Enclosure(s) (please Identify below):

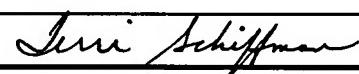
Remarks

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|-----------------------------------|----------------|
| Name | Dianne Brown | Registration No. (Attorney/Agent) | 42,068 |
| Signature |  | | Date 4/23/2007 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date: April 23, 2007

Typed or printed name Terri Schiffman

Signature  Date 04/23/2007



P&T OFFICE ACKNOWLEDGEMENT

| | |
|---|---------------|
| ATTORNEY | DATE |
| Dianne Brown | 04-23-07 |
| CASE NUMBER/ | SERIAL NUMBER |
| 20931YP | 10/506,399 |
| DATE FILED | |
| 09/01/2004 | |
| APPLICANT | |
| Ching Yi Chang | |
| EXPRESS MAIL NO. | |
| N/A | |
| The Patent & Trademark Office acknowledges, and has stamped hereon, the date of the receipt of the items checked below: | |
| <input checked="" type="checkbox"/> AMENDMENT | |
| <input type="checkbox"/> APPEAL AND FEE | |
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| <input type="checkbox"/> CERTIFICATE OF CORRECTION | |
| <input type="checkbox"/> FINAL FEE | |
| <input type="checkbox"/> LETTER | |
| <input type="checkbox"/> INFORMATION DISCLOSURE STATEMENT | |
| <input type="checkbox"/> PTO 1449 & REFERENCES | |
| <input type="checkbox"/> PETITION FOR EXTENSION OF TIME & FEE | |
| <input type="checkbox"/> INVITATION TO CORRECT | |
| <input type="checkbox"/> DEMAND-CHAPTER II & FEE SHEET | |
| <input type="checkbox"/> SEQUENCE STATEMENT | |
| <input type="checkbox"/> SEQUENCE LISTING | |
| <input type="checkbox"/> SEQUENCE DISKETTE | |



PATENT
CASE NO. 20931YP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In re application of: CHING YI CHANG
Serial No. 10/506,399
Filed September 1, 2004
Group Art Unit 3728
Examiner S. T. N. Luong
For: PHARMACEUTICAL TREATMENT BLISTER CARD

Transmitted herewith is an amendment in the above-identified application.

- No additional fee is required.
 The fee has been calculated as shown below.

CLAIMS AS AMENDED

| (1) | (2) Claims remaining after amendment | (3) | (4) Highest Number Previously Paid For | (5) Present Extra | (6) Rate | (7) Additional Fee |
|--|--|-----|--|-------------------------|-------------|--------------------------|
| Total Claims | * 41 | - | ** 43 = | 0 X | \$50 | = 0.00 |
| Independent Claims | * 4 | - | *** 4 = | 0 X | \$200 | = 0.00 |
| Multiple Dependent Claims | | | | | \$360 **** | = |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | | 0.00 |

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

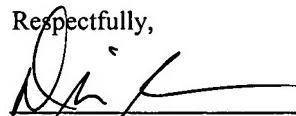
** If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

**** Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 0.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

Respectfully,


By: Dianne Brown

Attorney for Applicant(s)

Reg. No. 42,068

MERCK & CO., INC.
Patent Dept., RY60-30
P.O. Box 2000
Rahway, N.J. 07065-0907

(732) 594-1249

Date: April 23, 2007

IN DUPLICATE



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Ching Yi Chang

Serial No.: 10/506,399 **Case No.:** 20931YP

Art Unit:
3728

Filed: September 1, 2004

For: PHARMACEUTICAL TREATMENT BLISTER
CARD

Examiner:
S. Luong

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

This is in response to the Official Action dated January 25, 2007 for which a response is due by April 25, 2007. Please consider the remarks below.

CERTIFICATE OF MAILING

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VIRGINIA 22313-1450, ON THE DATE APPEARING BELOW.

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